



UTILITY PATENT APPLICATION TRANSMITTAL <small>(Only for new nonprovisional applications under 37 CFR 1.53(b))</small>	Attorney Docket No. 241758US2
	First Inventor or Application Identifier Masahiko OIKAWA
Title IMAGE FORMING APPARATUS, METHOD OF COPYING A DOCUMENT, AND COMPUTER PRODUCT	
Assignee Name:	
Assignee Address:	

08916 U.S. PTO
10/64402
08/20/03

APPLICATION ELEMENTS <small>See MPEP chapter 600 concerning utility patent application contents</small>	ADDRESS TO: Commissioner for Patents Mail Stop Patent Application Alexandria, Virginia 22313
<ol style="list-style-type: none"> <input checked="" type="checkbox"/> Fee Transmittal Form (e.g. PTO/SB/17) <small>(Submit an original and a duplicate for fee processing)</small> <input checked="" type="checkbox"/> Specification Total Sheets <input type="text" value="65"/> <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) Total Sheets <input type="text" value="13"/> <input type="checkbox"/> Oath or Declaration Total Pages <input type="text" value=""/> <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program <i>(Appendix)</i> <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission <i>(if applicable, all necessary)</i> <ol style="list-style-type: none"> <input type="checkbox"/> Computer Readable Form (CRF) Specification or Sequence Listing on: <ol style="list-style-type: none"> <input type="checkbox"/> CD-ROM or CD-R (2 copies); or <input type="checkbox"/> Paper <input type="checkbox"/> Statements verifying identity of above copies 	ACCOMPANYING APPLICATION PARTS <ol style="list-style-type: none"> <input type="checkbox"/> Assignment Papers (cover sheet & document(s)) <input checked="" type="checkbox"/> Application Data Sheet. See 37 CFR 1.76 <input type="checkbox"/> 37 C.F.R. §3.73(b) Statement <input type="checkbox"/> Power of Attorney <small>(when there is an assignee)</small> <input type="checkbox"/> English Translation Document <i>(if applicable)</i> <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations <input type="checkbox"/> Preliminary Amendment <input checked="" type="checkbox"/> White Advance Serial No. Postcard <input checked="" type="checkbox"/> Certified Copy of Priority Document(s) (1) <small>(If foreign priority is claimed)</small> <input type="checkbox"/> Applicant claims small entity status. <small>See 37 CFR 1.27</small> <input checked="" type="checkbox"/> Other: Request for Priority
17. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below: <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application no.: Prior application information: Examiner: Group Art Unit:	
For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation <u>can only</u> be relied upon when a portion has been inadvertently omitted from the submitted application parts.	
18. Amend the specification by inserting before the first line the sentence: <input type="checkbox"/> This application is a <input type="checkbox"/> Continuation <input type="checkbox"/> Division <input type="checkbox"/> Continuation-in-part (CIP) of application Serial No. Filed on <input type="checkbox"/> This application claims priority of provisional application Serial No. Filed	
19. CORRESPONDENCE ADDRESS  22850 (703) 413-3000 FACSIMILE: (703) 413-2220	

Name: Marvin J. Spivak	Registration No.: 24,913
Signature: 	Date: 8/20/03
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Registration Number 21,124	

Docket No. 241758US2

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

INVENTOR(S) Masahiko OIKAWA

SERIAL NO: New Application

FILING DATE: Herewith

FOR: IMAGE FORMING APPARATUS, METHOD OF COPYING A DOCUMENT, AND COMPUTER PRODUCT

FEE TRANSMITTAL

COMMISSIONER FOR PATENTS
ALEXANDRIA, VIRGINIA 22313

FOR	NUMBER FILED	NUMBER EXTRA	RATE	CALCULATIONS
TOTAL CLAIMS	37 - 20 =	17	x \$18 =	\$306.00
INDEPENDENT CLAIMS	12 - 3 =	9	x \$84 =	\$756.00
<input type="checkbox"/> MULTIPLE DEPENDENT CLAIMS (if applicable)			+ \$280 =	\$0.00
<input checked="" type="checkbox"/> LATE FILING OF DECLARATION			+ \$130 =	\$130.00
BASIC FEE				\$750.00
TOTAL OF ABOVE CALCULATIONS				\$1,942.00
<input type="checkbox"/> REDUCTION BY 50% FOR FILING BY SMALL ENTITY				\$0.00
<input type="checkbox"/> FILING IN NON-ENGLISH LANGUAGE			+ \$130 =	\$0.00
<input type="checkbox"/> RECORDATION OF ASSIGNMENT			+ \$40 =	\$0.00
TOTAL				\$1,942.00

- ☐ Please charge Deposit Account No. 15-0030 in the amount of _____ A duplicate copy of this sheet is enclosed.
- ☒ A check in the amount of **\$1,942.00** to cover the filing fee is enclosed.
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- ☒ The Director is hereby authorized to charge any additional fees which may be required for the papers being filed herewith and for which no check or credit card payment form is enclosed herewith, or credit any overpayment to Deposit Account No. 15-0030. A duplicate copy of this sheet is enclosed.

Respectfully Submitted,

OBLON, SPIVAK, McCLELLAND,
MAIER & NEUSTADT, P.C.

Date: 8/20/03



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